

SOLICITATION AMENDMENT

ARIZONA
DEPARTMENT OF CORRECTIONS
1601 W. JEFFERSON, MAIL CODE 55302
PROCUREMENT SERVICES
PHOENIX, ARIZONA 85007

SOLICITATION NO. ADOC12-00001105 AMENDMENT NO. 3 Contract Officer: Karen D. Ingram

SOLICITATION DUE DATE: December 21, 2011

SIGNED COPY OF THIS AMENDMENT MUST BE RETURNED WITH YOUR BID SOLICITATION.

THIS SOLICITATION IS AMENDED AS FOLLOWS:

RFP NO. ADOC12-00001105 – Privatization for All Correctional Health Services

CHANGES IN REQUIREMENTS THAT WILL FORMALLY CHANGE THE REQUIREMENTS WILL BE SHOWN AT THE BEGINNING OF THIS AMENDMENT.

AMEND TO CHANGE

Section 3, Page 124, Fee Schedule and Page 128 Budget Narrative have been replaced in their entirety and are attached to this amendment. Offerors shall use the attached Fee Schedule and Budget Narrative for their response to the RFP.

Questions submitted on November 3, 2011

Question 1: RFP Page 21 - 2.1.8.1/ Introduction - Please provide the annual average number of inmates housed in AZ from other states in the most recent two FY's.

Answer: Please refer to the RFP Section 2.1.8.2. The Department annually houses between 80 and 100 inmates from other states.

Question 2: RFP Page 21 - 2.1.7/ Introduction - Please provide the number of inmates in each of the last 2 FY's that were returned (for health reasons) from private prisons to AZ states prison complexes.

Answer: In FY 2010, 104 inmates were returned. In FY 2011, 35 inmates were returned.

Questions 3 and 4: RFP Page 27 - 2.2.44/Definitions - Please provide the number of inmates, by facility, in each of the 5 medical categories on July 1, 2011 and July 1, 2010. RFP Page 28 - 2.2.46/Definitions - Same as for medical on page 27 for mental health.

Answer: For the most current 2011 distribution please refer to the *Medical (M) and Mental Health (MH) Score Inmate Distribution by Complex as of 8/09/11* report posted under Data and Reports at http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

For 2010, see the following, which was included in the Data and Reports provided for the May 27, 2011 Correctional Health Services Request for Information:

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Arizona Department of Corrections Medical (M) and Mental Health (MH) Score Inmate Distribution by Complex as of 6/30/10

Medical Score Distribution M-Score	Eyman	Florence	Lewis	Perryville	Phoenix	Tucson	Douglas	Safford	Winslow	Yuma	Total
M-1	3,258	2,261	2,848	2,055	230	1,905	1,642	1,297	1,311	1,849	18,656
M-2	1,722	1,396	1,725	1,052	191	1,264	917	587	543	800	10,197
M-3	343	503	461	307	71	909	103	40	37	46	2,820
M-4	202	321	210	37	46	487	1	10	5	-	1,319
M-5	5	14	12	3	1	43	-	-	-	-	78
Total	5,530	4,495	5,256	3,454	539	4,608	2,663	1,934	1,896	2,695	33,070

Arizona Department of Corrections Medical (M) and Mental Health (MH) Score Inmate Distribution by Complex as of 6/30/10

Mental, Health Score Distribution MH-Score	Eyman	Florence	Lewis	Perryville	Phoenix	Tucson	Douglas	Safford	Winslow	Yuma	Total
MH-1	2,470	2,381	2,506	1,127	161	1,230	2,181	1,584	1,542	2,178	17,360
MH-2	1,562	991	1,013	1,053	29	816	479	335	352	507	7,137
MH-3	1,484	1,112	1,710	1,273	319	2,315	3	15	2	10	8,243
MH-4	14	11	27	1	25	247	-	-	-	-	325
MH-5	-	-	-	-	5	-	-	-	-	-	5
Total	5,530	4,495	5,256	3,454	539	4,608	2,663	1,934	1,896	2,695	33,070

Question 5: RFP Page 45 - 2.6.6/Requirements Please provide a listing with a copy of active court orders and/or consent decrees in AZ DOC.

Answer: There are currently no active court orders or consent decrees related to the Arizona Department of Corrections' Health Services.

Question 6: RFP Page 61 - 2.8.15.1.2/Responsibility for and Coordination of Care - Please expand on the intent of the IC Program as it relates to transportation.

Answer: Communicating universal precautions and any required special handling of an inmate during transport, e.g., using a N95 mask.

Question 7: RFP Page 64 - 2.10.5.1/Medical Services - Please provide by name the chronic care clinics provided at each complex and the number of inmates enrolled in each of those chronic care clinics.

Answer: ADC does not have chronic care clinics. Inmates with chronic conditions are seen during regular provider lines.

Question 8: RFP Page 65 - 2.10.5.5.3/Medical Services - Please provide a list of all sites that currently have on-site physical therapy clinics and the equipment by site.

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~~Answer: ADC does not have on-site physical therapy and these services are performed by outside vendor providers.~~

Question 9: RFP Page 58 - 2.8.9.7/Responsibility for and Coordination of Care - In order to answer this RFP requirement please provide a detailed by site/complex of current telemedicine equipment available. Also please describe the physical location within the health care complexes where it's located. Last, list the type of specialty services and corresponding number of patients seen by specialty for the period of 7-1-10 through 6/30/11

Answer:

Current telemedicine equipment available by ADC site/complex:

1. ASPC-Douglas: Telemed location is in 800 medical building on Mohave Yard. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and computer.
2. ASPC-Eyman: Telemed location is Browning Unit. Equipment: Tandberg, Patient Camera Exam, Digital Camera and Computer.
3. ASPC-Florence: Telemed location is in Central Unit. Equipment: Tandberg, Otoscope, Patient Camera Exam, Digital Camera and Computer.
4. ASPC-Lewis: Telemed location is in Complex Medical. Equipment: Tandberg, Patient Camera Exam, Digital Camera and Computer.
5. ASPC-Perryville: Telemed location is in Complex Medical. Equipment: Tandberg, Otoscope, Camera, Computer.
6. ASPC-Safford: Telemed location is in the Medical Building on the Tonto Yard. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.
7. ASPC-Tucson: Telemed location is HUB Building 7. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.
8. ASPC-Winslow: Telemed location is in Medical Building. Equipment: Tandberg, Otoscope, Patient Camera Exam, Digital Camera and Computer.
9. ASPC-Yuma: Telemed location is in Medical, Dakota Building 9. Equipment: Tandberg, Otoscope, Patient Exam Camera, Digital Camera and Computer.

Specialty Services and corresponding number of patients seen by specialty for the period 7/01/10 through 6/30/11:

1. ASPC-Douglas: 5 Orthopedic
2. ASPC-Eyman: 4 Infectious Disease
3. ASPC-Florence: 4 Infectious Disease
4. ASPC-Lewis: 12 Infectious Disease, 63 Orthopedic, 16 Rheumatology
5. ASPC-Perryville: 3 Infectious Disease
6. ASPC-Tucson: 27 Infectious Disease, 24 Orthopedic, 12 Rheumatology
7. ASPC-Yuma: 2 Infectious Disease, 26 Orthopedic, 3 Rheumatology

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Question 10: RFP Page 77 - 2.10.28/Medical Services - Please provide the annual total number of inmates released for each of the past two FY's and of those released how many were MH patients.

Answer:

During the period July 1, 2009 through June 30, 2010, ADC released 16,405 inmates from state-run prisons. Of these, 3,360 were scored as an MH 3 or higher at the time of release.

During the period July 1, 2010 through June 30, 2011, ADC released 15,051 inmates from state-run prisons. Of these, 3,099 were scored as an MH 3 or higher at the time of release.

Mental Health Scores:

MH-1 No Need: Inmate does not require placement in prison complex with regular psychological/psychiatric staffing and services on site. Inmate has no known history of mental health problems or treatment. Inmate has no recognized need for psychotropic medication, psychiatric monitoring or psychological counseling or therapy.

MH-2 Low Need: Inmate does not require placement in prison complex with regular psychological/psychiatric staffing and services on site. Inmate has a history of mental health problems or treatment, but has no current recognized need for psychotropic medication, psychiatric monitoring or psychological counseling or therapy.

MH-3 Moderate Need: Inmate requires placement in prison complex with regular, full-time psychological/psychiatric staffing and services. Inmate has recognized or routine need for mental health treatment and/or supervision.

MH-4 High Need: Inmate requires specialized placement in mental health program with highly structured setting and/or with intensive psychological/psychiatric staffing and services. Inmate has recognized need for psychiatric monitoring and for intensive mental health treatment and/or supervision.

MH-5 Acute Need: Inmate requires placement in the Department licensed behavioral health treatment facility to receive intensive psychological/psychiatric services. Inmate has a recognized acute need for mental health treatment and supervision.

Question 11: RFP Page 88 - Section 2.13.3/Mental Health - The RFP says Mental Health practitioners shall be available at all Department institutions twenty-four (24) hours per day, seven (7) days per week and after-hours and on weekends and holidays by telephone for emergency consultation and direction. Please clarify what is meant by this statement- is this indicating that MH practitioners will be available at all facilities in person or by telephone 24-7 365 days a year? Is this describing "on-call" availability?

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Answer: Yes, this is referring to on-call. Mental Health practitioners must be available after work hours, seven days a week, including holidays by "on-call" availability.

Question 12: RFP Page 88 - Section 2.13.4/Mental Health - Will "Psychiatric Nurses" have to be fully dedicated to mental health?

Answer: Yes, Psychiatric nurses shall be fully dedicated to the Mental Health program.

Question 13: RFP Page 88 - Section 2.13.6/Mental Health - For the required Mental Health Care Management/Utilization Management Program, will the Department be providing formal Department guidelines and/or requirements to follow?

Answer: Formal Guidelines are contained in ADC Department Orders, Directors Instructions and the Mental Health Technical Manual. The Contractor will be required to follow these guidelines. Refer to RFP page 87, Section 2.13.1.

Question 14: RFP Page 88 - 2.13.7.1/Mental Health - In a situation where the Department intervenes, will the final decision on inmate care be made by a vendor clinician or a representative from the Department?

Answer: In the circumstances identified in this section, the Department's representative will make the final decision on inmate care.

Question 15: RFP Page 88 - 2.13.8/Mental Health - Does the statement "practice guidelines" refer to mental health treatment guidelines and/or psychiatric treatment guidelines?

Answer: "Practice guidelines" refer to mental health treatment guidelines which include the Psychiatric Treatment Guidelines.

Question 16: RFP Page 88 - Section 2.13.9/Mental Health - Please confirm that the Department will be providing the primary alcohol and other drug treatment for inmates and the Contractor will provide integrated, co-occurring disorders treatment for inmates in collaboration with the Department. If so, please provide a list of the facilities where the Department will provide the primary alcohol and other drug treatment programs and where collaboration is expected?

Answer: The Department will continue to provide primary addiction treatment services through the Counseling and Treatment Services Program. This is not about specific facilities where collaboration is expected. Collaboration, as referenced in Section 2.13.9, pertains to ADC Addiction Treatment staff and Contractor Mental Health Staff sharing information regarding mentally ill inmates as it relates to their specific programming.

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Question 17: RFP Page 89 - 2.13.10.6/Mental Health - What specialized psycho-educational groups and mental health groups are currently being provided by the Department and what are expected by the Department from the vendor?

Answer: Psychology personnel on each unit may run different psycho-educational groups on topics to the yard population. In addition to conventional treatment topics, these may include mindfulness, parenting, insomnia, pain management, Traumatic Brain Injury (TBI) Education, etc. The Contractor shall be responsible for providing specialized psycho-educational groups. The Offeror in their plan submitted per RFP Section 2.13.14, shall describe the psycho-educational groups they shall provide.

Currently, ADC has specialized group programs that vary at institution units and are specific to individual units. Phoenix, Perryville and Tucson Complexes offer the most extensive group projects. See programs listed for these institutions:

ASPC-Phoenix – Flamenco: Current Events, Anger Management, Mind over Mood, Values Clarification, Social Studies/Peer Relationships and Exercise as Therapy.

ASPC-Phoenix – Men’s Treatment Unit: Post Traumatic Stress Disorder Group, Anger Management, Interpersonal Relationships, Co-Occurring Disorders, Anxiety/Stress Management and Music Therapy.

ASPC-Perryville – Women’s Treatment Unit: Similar programs to those offered at Phoenix-Men’s Treatment Unit.

ASPC-Tucson – Mindfulness, Compassion for Self, Old Timers Group, Anger Management, Domestic Violence, Smart Recovery, Native Wisdom, Current Events Group, Central Thinking Group, PTSD Treatment Group, Parenting Group, Wellness/Exercise Group and General Mental Health Process Group.

Question 18: RFP Page 89 - 2.13.10.12/Mental Health - What special programs are currently being provided by the Department and what are expected by the Department from the vendor?

Answer: See responses to Questions 20 and 21

Question 19: RFP Page 89 - Section 2.13.11.1/Mental Health - Please confirm that the Contractor is not responsible for providing mental health services for inmates at/in the Arizona State Hospital.

Answer: The Contractor shall not be responsible for providing mental health services at the Arizona State Hospital. However, if an ADC inmate is court-ordered to the State Hospital for treatment, the Contractor will be financially responsible for the costs involved in the inmate’s treatment. Refer to RFP Page 90, Section 2.13.12 regarding Contractor’s financial responsibility for arranging services not available at ADC and A.R.S. Section 31-226.

A link to A.R.S. Section 31-226 can be found under Critical Reference Material at http://www.azcorrections.gov/HealthServicesRFP_2.html

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Question 20: RFP Page 89 - Section 2.13.11.2/Mental Health - Please list each facility that provides residential mental health treatment as described in this section including the number of units, nature and scope of the care, and number of beds on each unit.

Answer: Listed are the facilities that provide residential mental health treatment, the nature, scope of care and number of beds on each unit.

1. ASPC-Phoenix, Baker Unit: Acute Psychiatric Stabilization for males, 22 beds
2. ASPC-Phoenix, George Ward: Acute Psychiatric Stabilization for females, 22 beds
3. ASPC-Phoenix, Flamenco Unit: Intermediate Mental Health/Psychiatric treatment for males, 85 beds
4. ASPC-Phoenix Men's Treatment Unit: Residential Day Treatment Program for males, 150 beds
5. ASPC-Perryville Women's Treatment Unit: Residential Day Treatment program for females, 20 beds
6. ASPC-Eyman Behavioral Management Unit: Incentive Based Treatment Program for males under both mental health needs and severe and persistent Axes II acting out behaviors, 30 beds.

Question 21: RFP Page 89 - Section 2.13.11.3/Mental Health - Please list each facility that provides day mental health treatment as described in this section including the number of units, nature and scope of the care, and numbers of beds on each unit. In addition, please indicate if the content of this section is intended to be for inmates with a serious mental illness who have been discharged from a residential treatment program.

Answer: Tucson Step-Down Program – Provides transition program for male inmates who are released from residential care or who have been chronically unable to adjust to general population due to mental health issues – 72 beds. For specific program criteria and treatment focus see Mental Health Technical Manual, Chapter 3, Sec. 4.0, Behavioral Health Unit, for specific program criteria and treatment focus.

Question 22: RFP Page 90 - Section 2.13.11.4/Mental Health - Please list each facility that provides residential mental health treatment as described in this section including the number of units, nature and scope of the care, and numbers of beds on each unit.

Answer: See answer provided for Question 20.

Question 23: RFP Page 90 - 2.13.11.5/Mental Health - What specialized treatment programs are currently being provided by the Department and what are expected by the Department from the vendor?

Answer: See answers provided for Question 17 and 20.

Question 24: RFP Page 90 - 2.13.12/Mental Health - Please indicate what necessary mental health services are not currently available within the Arizona State Prison Complex services and are being provided by on-site and off-site community provider facilities and specialty clinics.

Answer: With the exception of court commitments to the State Hospital, all other mental health services are provided within the ADC facilities.

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Question 25: RFP Page 21 - 2.1.8.2/Introduction - Please define "normal inmate maintenance" regarding health, dental and MH services for non-ADOC state inmates and an example of what would be considered "extraordinary health care expenses" where the contractor would be responsible to notify the sending state prior to incurring?

Answer: Normal inmate maintenance would include the scope of services that a primary care physician can provide or, routine care. Extraordinary health care expenses refer to any care beyond the scope of services that a primary care physician can provide or, non-routine care.

Question 26: RFP Page 66 - 2.10.5.5.7/Medical Services - Can an RN provide the face to face encounter in cases of negative test results for HIV & Hepatitis testing?

Answer: Yes, the RN can provide the face to face encounter in cases of negative test results for HIV & Hepatitis testing.

Question 27: Pharmacy Utilization - 1. Please provide the actual drug utilization for the most recent quarter and for the previous 12 months. Please provide drug, strength and quantity and cost.

Answer: Please refer to the following report posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Drug Utilization Report 10/01/2010 through 10/1/2011

Question 28: Pharmacy Utilization - 2. Please provide the actual drug utilization for the HIV, Hep C and IV medications

Answer: Please refer to the following reports posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Drug Utilization Report 10/01/2010 through 10/1/2011

ADC Department of Corrections Pharmacy Expense Reporting FY2007 through FY2009 Filled Prescription Summary

ADC Department of Corrections Pharmacy Expense Reporting FY10 Filled Prescription Summary

ADC Department of Corrections Pharmacy Expense Reporting FY11 Filled Prescription Summary

Question 29: Pharmacy Utilization - 3. Please provide actual drug utilization and costs purchased from emergency back up pharmacies for the past 12 months.

Answer: \$3,034 was spent in the past 12 months to purchase medications from emergency back up pharmacies. Actual drug utilization information is not available.

Question 30: Pharmacy - What is the current return policy for medications? What is the last 12 months dollar amount of credits?

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~~Answer:~~ Current ADC policy allows medication that has not been in the possession of the inmate may be returned to the Pharmacy for reclamation, both partial quantities and full quantities. The last 12 months of reclamation provided a credit of \$1,179,743.

Question 31: Pharmacy - What is the current admin fee per Rx.

Answer: There is no current administrative fee for prescriptions.

Question 32: Pharmacy - What is the last 12 month total Rxs.

Answer: Please refer to the following reports posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Active Prescription Totals 7-01-07 through 6-30-09

Active Prescription Totals 7-01-09 through 6-3-10

Active Prescription Totals 7-01-10 through 6-3-11

Active Prescription Totals 7-01-11 through 10-31-11

Question 33: Pharmacy - How are the facilities ordering their medications? Electronically or via fax?

Answer: ADC Facilities are ordering by FAX or by presenting original prescriptions to the pharmacy for those complexes with onsite pharmacies.

Question 34: Pharmacy - Do all of the med rooms have internet access?

Answer: None of the medication rooms have internet access. All the Nursing Stations have internet access.

Question 35: Pharmacy - Please provide a copy of the monthly and or quarterly statistical pharmacy data. Please provide this data for the past 12 months. i. Include # Formulary Orders ii. Include # Non-Formulary Orders iii. Include# Psychotropic Orders iv. Include # Hep C orders v. Include # HIV Orders.

Answer: Please refer to the following reports posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Active Prescription Totals 7-01-10 through 6-3-11

Active Prescription Totals 7-01-11 through 10-31-11

*Arizona Department of Corrections Pharmacy Expense Reporting for FY 11 Filled Prescription Summary
(see Psychotropic, Hep C and HIV data)*

Question 36: Pharmacy - Percentage and number of inmates on medications

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Answer: Please refer to the following reports posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

*Arizona Department of Corrections Pharmacy Expense Reporting FY 11 Filled Prescription Summary
Active Prescription Totals 7-01-10 through 6-3-11
Active Prescription Totals 7-01-11 through 10-31-11*

Question 37: Pharmacy - Percentage and number of inmates on psychotropics.

Answer: Please refer to the following report posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

*Arizona Department of Corrections Pharmacy Expense Reporting FY 11 Filled Prescription Summary
(see Mental Health data)*

Question 38: Pharmacy - Percentage and number of inmates on HIV medications.

Answer: Please refer to the following report posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

*Arizona Department of Corrections Pharmacy Expense Reporting FY 11 Filled Prescription Summary
(see HIV data)*

Question 39: Pharmacy - Does your current pharmacy provide IV medications or is that a contracted service?

Answer: The current pharmacy provides IV medications; TPN and antibiotics are contracted out. Some exceptions are listed on the *Drug Utilization Report 10/01/2010 through 10/01/2011*. This report can be found under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Question 40: Pharmacy - Do you have 340b pricing in any regions and if so which ones?

Answer: No, ADC does not have 340b pricing

Question 41: Pharmacy - The RFP states a perpetual inventory of stock and controlled substances must be maintained by the contractor. Can you describe the current process in place to fulfill this requirement? Will it be acceptable to the DOC to have the stock perpetual inventory maintained in a paper format or will the perpetual inventory be required to be maintained electronically?

Answer: Currently, the ADC Complex Medical staff maintains perpetual inventories for narcotic sub-stock and count narcotics at each shift change. Currently, ADC Complex Medical staff and ADC Security staff maintain perpetual inventories for syringes/needles and count syringes/needles at each shift change.

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ADC currently maintains records in paper format. Once EMR is available, the records would also be stored electronically.

Question 42: Pharmacy - RFP states the contractor must follow the current MAR format. Can a copy of current MAR template be provided?

Answer: RFP Page 85, Section 2.12.25 states the contractor shall document and maintain a Medication Administration Record ((MAR). It does not state that the contractor must follow the current MAR format. The contractor is required to include information on the MAR as referenced in Section 2.12.25.

As requested, a copy of the current *Medication Administration Record* has been posted under Data and Reports at:

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Question 43: Pharmacy - Is the contractor responsible for all delivery costs. Does this also include the cost of delivery charges for couriers and/or delivery fees submitted by local backup pharmacies? Can these be billed as a pass through charge?

Answer: Please refer to RFP Sections 2.6.1 and 2.12.1 which require the Contractor to be financially responsible for all costs associated with correctional healthcare services, including all pharmacy services. The contractor will be responsible for all delivery costs. This includes the cost of delivery charges for couriers and/or delivery fees submitted by local backup pharmacies. These cannot be billed as a pass through charge.

Question 44: Pharmacy - Can you please provide the following: Average daily population? Average number of prescriptions filled per month? What percentage of medication orders are dispensed as stock medications? What percentages of stock medications are dispensed in blister cards?

Answer: The FY 2011 Average Daily Population for ADC state operated prisons is 34,155. Approximately 0.4% of monthly medication orders are dispensed as stock medications. None of the stock medications are dispensed in blister cards.

Please refer to the following reports posted under Data and Reports at:

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Active Prescription Totals 7-01-10 through 6-3-11

Active Prescription Totals 7-01-11 through 10-31-11

Question 45: EMR - Is there a current EHR/EMR system in place? If so, would an interface be required to connect with system? Would you consider an alternate system to implement?

Answer: ADC does not have a current EHR/EMR system in place. Please refer to RFP Section 2.10.25 and 2.22 for requirements regarding the Electronic Health Records (EHR) system. The Contractor is

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responsible for the implementation of a clinically comprehensive and interoperable Electronic Health Records (EHR) system through which the Contractor shall create and maintain a Health Insurance Portability and Accountability Act-compliant, confidential, secure medical record for each inmate.

Question 46: Pharmacy - 30. What is the current medication return policy? How are scheduled control substance medications being destroyed as they cannot be returned?

Answer: Please see the answer to Question 30. ADC Medications are currently picked up by a reverse distributor on a regular basis for destruction.

Question 47: Pharmacy - Is there a current barcode management system in place? If so, does the system account for every dose administered? Is the system used for inventory reconciliation, returns and order placement only? Would you consider an alternate system to implement?

Answer: No. ADC does not have a current barcode management system in place. Please refer to RFP Section 2.12.11.

Question 48: Pharmacy - Do med carts need to be provided as part of the proposal? Are current carts able to be purchased or are new carts required? How many med carts would you need?

Answer: Responses provided in relation to this RFP should be based on the requirements identified within. ADC has 54 medication carts that will be made available to the Contractor pursuant to RFP Subsection 2.6.12.3. If the awarded contractor determines that additional carts are necessary, the Contractor shall be responsible for the costs associated for the additional carts.

Question 49: Pharmacy - How will you require bidders to demonstrate they can provide stock medications in blister cards through an FDA registered repacker? Will you require prior experience as a repacker?

Answer: Please refer to RFP page 82, Sections 2.12.13 and 2.12.15. The Contractor shall meet all packaging and labeling requirements as required by the manufacturer, State and Federal laws.

Question 50: Pharmacy - How will you require bidders to demonstrate they are able to provide the required drug pedigrees for stock medication? Will you require that drug pedigrees be provided electronically?

Answer: Contractor must be registered with the FDA and DEA and licensed by the applicable State Board of Pharmacy. Contractor must certify that Vendor agrees that its business practices meet or exceed Arizona's Pedigree requirements. Contractor must certify that it will adhere to any future changes in Pedigree laws in Arizona. All fees associated with providing Pedigrees must be transparent and will be included in the Contractor's costs. Pedigrees may be provided by paper until future standards of practice become electronic documentation for the Pedigree.

Question 51: Pharmacy - Will you require that a subcontracted pharmacy vendor be a Verified-Accredited Wholesale Distributor at time of proposal/bid submittal?

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Contract Officer: Karen D. Ingram

SOLICITATION DUE DATE: December 21, 2011

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THIS SOLICITATION IS AMENDED AS FOLLOWS:

Answer: ~~The subcontractor is not required to be a Verified – Accredited Wholesale Distributor.~~
However, the subcontractor will be required to have an established relationship with a Verified – Accredited - Wholesale Distributor at the time of proposal bid submittal.
Refer to RFP page 81, section 2.12.9, 2.12.10 and 2.12.11.

Question 52: Pharmacy - Can you provide a complete formulary management report?

Answer: Please refer to the following report posted under Data and Reports at:
http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Arizona Department of Corrections Pharmacy Expense Reporting FY 11 Filled Prescription Summary

Question 53: Pharmacy - Are you currently utilizing a web based pharmacy ordering system? If not, would you consider using one?

Answer: ADC currently utilizes a web based ordering system with Cardinal, the Prime Vendor. The Department sends the order to their website

Question 54: Pharmacy - Does the Department have plans to expand access to 340b medications to include conditions other than HIV and if so will that be carved out of the at risk pharmacy proposals submitted by vendors? If yes, can you describe how the decrease in reimbursement to the vendor shall be calculated?

Answer: ADC does not have 340b pricing.

Question 55: Pharmacy - Is the DOC pharmacy able to return any unopened bottles of medication in its regional pharmacies to its wholesaler for credit so that vendors do not have to purchase this unused stock?

Answer: Please refer to RFP Section 2.6.13.

Question 56: Pharmacy - May the vendor initiate 340b programs of its own to cut costs that will be included in the at risk pharmacy proposal?

Answer: The vendor would need to contact the 340b Entities to see if they could qualify for 340b pricing.

Question 57: Pharmacy - Will any DOC pharmacy staff be available to assist or audit the inventory counts that must occur for the vendor to purchase these medications from the DOC?

Answer: Please refer to RFP Section 2.6.13.

Question 58: Pharmacy - Will medications that have been repackaged or are nearing their expiration date be required to be purchased by the vendor?

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THIS SOLICITATION IS AMENDED AS FOLLOWS:

Answer: Please refer to RFP Section 2.6.13.

Question 59: Pharmacy - Will the vendor be responsible for the cost of the medications covered under the 340b programs?

Answer: Please refer to RFP Sections 2.6.1 and 2.12.1 which require the Contractor to be financially responsible for all costs associated with correctional healthcare services, including all pharmacy services. The Contractor shall be responsible for the costs of all medication.

Question 60: Pharmacy - What facilities currently are using 340b pricing and what are the medications utilization numbers with dose, strength, quantity and cost over the last 12 months?

Answer: ADC does not have 340b pricing for any location.

Question 61: Pharmacy - Due to the highly unpredictable nature of future Hepatitis C drug treatment costs, will the DOC accept proposals for pharmacy that allow for a carve out of Hepatitis C drugs whereby the cost of these drugs is incurred directly by the DOC?

Answer: Please refer to RFP Sections 2.6.1 and 2.12.1 which require the Contractor to be financially responsible for all costs associated with correctional healthcare services, including all pharmacy services. The Contractor will be responsible to assume all costs to treat Hepatitis C.

Questions submitted on November 7, 2011

Question 1: EHR - The RFP requires the vendor to implement an EHR system and include that cost in the single PIPD price. Where should vendors put the EHR cost within the 11 detailed cost break-down categories that are required?

Answer: Please see change to Section 3 at the beginning of this amendment. Refer to new item on Fee Schedule and Budget Narrative under part 11, "Other". In addition, costs should be described in detail as requested in Section 2.22.18 of the Scope of Work.

Question 2: Forecast of inmate census - Given the potential impact of the additional 5000 beds and the legislation which places inmates serving less than one year in county jails, please provide a forecast of ADC census for this contract looking out 6, 12, 18 and 24 months.

Answer: ADC population forecasts through FY 2017 are provided. These forecasts are subject to change and shall not be construed to guarantee population for the purposes of a Contract in any way.

July 1, 2012 Inmate Population Forecast for ADC state-run prisons only: 34,259

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THIS SOLICITATION IS AMENDED AS FOLLOWS:

~~January 1, 2013 Inmate Population Forecast for ADC state-run prisons only: 34,709~~
July 1, 2013 Inmate Population Forecast for ADC state-run prisons only: 33,184

January 1, 2014 Inmate Population Forecast for ADC state-run prisons only: 32,784
July 1, 2014 Inmate Population Forecast for ADC state-run prisons only: 32,384

January 1, 2015 Inmate Population Forecast for ADC state-run prisons only: 32,984
July 1, 2015 Inmate Population Forecast for ADC state-run prisons only: 32,584

January 1, 2016 Inmate Population Forecast for ADC state-run prisons only: 33,184
July 1, 2016 Inmate Population Forecast for ADC state-run prisons only: 33,784

January 1, 2017 Inmate Population Forecast for ADC state-run prisons only: 34,384
July 1, 2017 Inmate Population Forecast for ADC state-run prisons only: 34,984

As stated in the RFP, page 22, Section 2.1.12 of the Scope of Work, the Department reserves the right to require the Contractor to add or delete an Arizona State Prison Complex in addition to those originally included under this Request for Proposal, and to adjust the number of inmates served at any Contracted site. Therefore, the Offeror is put on notice that the number of inmates covered under this Contract shall increase and decrease over time and shall be prepared in advance to agree to make necessary adjustments required by population changes.

Question 3: Billing Start-At the bid conference you stated the contract starts at Award Date which will also start the 90-day vendor transition. Since the vendor will start incurring costs on this date, we are assuming that the PIPD billing starts on that date as well. Is this correct?

Answer: Please refer to RFP, Special Terms and Condition, Section 1.14 page 4. Section 1.14.2 identifies that billing begins on the first day of operation after the transition period.

Question 4: Outstanding medical claims - With respect to vendor performance measures, how will outstanding medical claims at Award Date be handled? How do we ensure collection of prior claims will not negatively impact vendor performance measurement

Answer: Any outstanding medical claims that are the responsibility of ADC, based on dates of service prior to the first day of operation (i.e. after the 90 day transition period), will be billed to ADC using current claims processing procedures and under current ADC contracts. The Contractor's performance will have nothing to do with care provided prior to the first day of operation.

Question 5: PIPD Cost Comparison - In order for ADC to compare vendor PIPD cost with current ADC PIPD cost, it is assumed that you have the cost figures for the 11 break-down categories as a baseline. Can you provide that cost breakdown for FY 2010 and FY2011?

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Answer: The Department's FY 2010 Annual Cost Per Inmate (CPI) of \$3,732 and FY 2011 Estimated Annual Cost Per Inmate (CPI) of \$3,256 are posted on the Department's webpage at http://www.azcorrections.gov/adcreports/Zoya_healthstats.aspx.

This identifies the FY 2011 Annual Cost Per Inmate (CPI) of \$3,256* by the 7 following categories:

Admin.	\$ 319.71
Medical	\$ 1,335.59
Dental	\$ 158.69
Mental Health	\$ 367.99
Nursing	\$ 652.61
Pharmacy	\$ 385.00
Medical Records	\$ 37.93

- NOTE: FY 2011 costs are preliminary since State statutes allow a 12 month Administrative Adjustment period to pay claims incurred in the prior fiscal year.

Also please see *FY 2010 Health Services Expenditure Information*, which has been posted under Data and Reports at http://www.azcorrections.gov/adcreports/adminservices/data_report_list_092111.aspx

Question 6: FY 2011 Total Costs - In FY10, the total healthcare cost was stated to be \$122 million which included seven months of Medicaid rates. Please provide total cost number for FY2011 to include twelve months of Medicaid rates.

Answer: As noted in the answer to Question 5, FY 2011 costs are not finalized until June 30, 2012. The FY 2011 preliminary CPI is identified in the answer to Question 6, above.

Question 7: Performance Outcomes - It was stated at the Bid Conference that the vendor will be held accountable for 100% compliance on all performance outcomes. Can you provide ADC's compliance rate for these same categories for FY 2010 and FY 2011? Will you allow the vendor to suggest alternative compliance guidelines in its proposal?

Answer: The requested Department compliance rate information is not available. Responses provided in relation to this RFP should be based on the requirements identified within. Inclusion of "alternative compliance guidelines" in a proposal would constitute an exception to terms and conditions. Please refer to RFP, Uniform Instructions to Offerors, Section C.4, Exceptions to Terms and Conditions.

Question 8: Staffing # to use - At the Bid Conference it was noted that ADC has a current FTE count of 593 while ADC stated in May 2011 it has an authorized count of 778. This was explained as the difference between budgeted and filled positions. Which cost number, budgeted vs. actual, should the vendor consider in determining its PIPD cost.

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THIS SOLICITATION IS AMENDED AS FOLLOWS:

Answer: The ADC Health Services Positions as of October 31, 2011 report has been updated and revised and posted under Data and Reports at

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

ADC staffing is not relevant to this RFP. Although RFP Subsection 2.17.4.1 requires that a Contractor give ADC employees displaced by a Contract first consideration for employment in comparable positions to those they currently hold, there is no requirement that a Contractor retain a staffing structure identical to the one ADC currently has in place. Per RFP Subsection 2.17.6.1, an Offeror is required to submit as part of the response to the request for proposal a written proposed staffing pattern demonstrating how they will adhere to or exceed all applicable standards of care at all Arizona State Prison Complexes and all Health Services Units. The proposed staffing pattern as well as the breakdown of Employee Personal Services and Employer Related Expenditures for Employees, per the Fee Schedule, are solely determined by the Offeror.

Question 9: Benefit % - In the provided report, HS Positions as of 8/5/11, salary information by role is displayed. Does this salary figure include benefits? What benefit % should be used for ADC employees?

Answer: The ADC Health Services Positions as of October 31, 2011 report has been updated and revised and posted under Data and Reports at

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

ADC salary information does not include benefits. ADC benefit percentages are irrelevant to an offeror's submittal. Furthermore, ADC staffing is not relevant to this RFP. Although RFP Subsection 2.17.4.1 requires that a Contractor give ADC employees displaced by a Contract first consideration for employment in comparable positions to those they currently hold, there is no requirement that a Contractor retain a staffing structure identical to the one ADC currently has in place. Per RFP Subsection 2.17.6.1, an Offeror is required to submit as part of the response to the request for proposal a written proposed staffing pattern demonstrating how they will adhere to or exceed all applicable standards of care at all Arizona State Prison Complexes and all Health Services Units. The proposed staffing pattern as well as the breakdown of Employee Personal Services and Employer Related Expenditures for Employees, per the Fee Schedule, are solely determined by the Offeror.

Question 10: RFP Page 64 - 2.10 Medical Services - Please provide 2 years history of inpatient stays by hospital provider to include diagnosis and length of stay.

Answer: Please refer to the following report posted under Data and Reports at:

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Hospital Admission Summary Report Fiscal Year 2007 through Fiscal Year 2011.

This report summarizes by ADC Complex the number of admissions and days in the hospital. Information regarding diagnosis is not available.

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Question 11: RFP Page 64 - 2.10 Medical Services - Please provide 2 years history of total overall spent for inmate health care, with line item breakdown similar to pricing sheets.

Answer: Please see the answer to Question 5.

Question 12: RFP Page 64 - 2.10 Medical Services - Please provide claims detail breakout between inpatient and outpatient services to include diagnosis description, diagnosis code, provider name, and amount paid.

Answer: The requested information is not tracked in the format requested. Please refer to the following report posted under Data and Reports at:

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

FY 2008 through FY 2011 TPA Claims by Diagnosis Reports
FY 2011 Health Care Services by Providers Paid through ADC.

Question 13: RFP Page 21 - 2.1.8.1 - Please provide a cost breakout for the past three years of extraordinary health expenses paid by the Department for Arizona inmates housed within prisons in other states.

Answer: Please refer to the *Interstate Compact Inmates FY 2008-FY2011* report posted under Data and Reports at

http://www.azcorrections.gov/adcd/divisions/adminservices/data_report_list_092111.aspx

Question 14: RFP Page 156 - Exhibit 4: Monetary Sanctions - Please provide clarification on how the Department will determine if a monetary sanction will apply for failure to provide comprehensive coverage 24/7. Is there a specified staffing level percentage that will be required by position or shift?

Answer: Determinations regarding actions taken against the Contractor shall be made as explained in RFP Sections 2.19.5, 2.19.6, 2.19.7, and 2.19.8. Per RFP Subsection 2.17.6.1, an Offeror is required to submit as part of the response to the request for proposal a written proposed staffing pattern demonstrating how they will adhere to or exceed all applicable standards of care at all Arizona State Prison Complexes and all Health Services Units.

Question 15: RFP Page 22 - 2.1.12.1 - Should contractors use the September 2011 population number of 33,586 to calculate the requested per inmate per day capitation rate? If not, please provide the population number that should be used for this purpose.

Answer: The Offeror must provide the information they want to include within their proposal response appropriate to the requirement.

ADC average daily population (ADP) for the period FY 2004 through FY 2011 is as follows:

40,226

FY 2011

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34,155	ADC State Operated Prisons
6,071	ADC State Contracted Prisons

40,458 FY 2010

31,766	ADC State Operated Prisons
8,692	ADC State Contracted Prisons

39,626 FY 2009

31,353	ADC State Operated Prisons
8,273	ADC State Contracted Prisons

37,910 FY 2008

30,402	ADC State Operated Prisons
7,508	ADC State Contracted Prisons

35,767 FY 2007

30,172	ADC State Operated Prisons
5,595	ADC State Contracted Prisons

33,704 FY 2006

28,379	ADC State Operated Prisons
5,325	ADC State Contracted Prisons

31,826 FY 2005

27,913	ADC State Operated Prisons
3,913	ADC State Contracted Prisons

31,102 FY 2004

28,329	ADC State Operated Prisons
2,773	ADC State Contracted Prisons

Question 16: Section 2.4.5 - Financial Solvency - Are potential subcontractors responsible to maintain capitalization and surplus requirements stated in section 2.4.5.1 p. 41 of RFP?

Answer: Financial solvency described in Section 2.4.5 relates to the awarded Contractor, not any subcontractor.

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Questions submitted on November 10, 2011 and November 14, 2011 are currently being reviewed and will be answered in a subsequent amendment to follow.

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FEE SCHEDULE In accordance with the change at the beginning of this amendment.

- 3.1 Proposed fees must represent all required services and shall include applicable State and local taxes, workmen's compensation, insurance, profit and overhead.
- 3.2 The Department shall make payment based on acceptance of final written report(s) and/or approved invoices.
- 3.3 The Department shall not compensate for mileage at the current State rate.
- 3.4 Proposed fees shall not include State per diem rates and lodging expenses associated with travel.
- 3.5 If proposing to increase on-site infirmery beds, clearly identify the amount required to fund capital construction on line 7.5 AND note any reduction due to savings for having additional on-site facility capacity on line 3.1.1.

Offerors are required to provide a fixed per day per inmate capitation rate that shall cover provision of *ALL* required services as pertains to the entire inmate population. The identified rate must include amortized costs as identified and requested herein. A separate Fee Schedule, Per Diem Rate Schedule and Budget Narrative shall be provided.

Type the capitation rate in the space provided below. Each expense item's relative daily cost, per inmate, per day, must be within the proposed per diem rate. If an expense item on the Fee Schedule is not applicable, put N/A in the space provided under "Relative Daily Cost". All expenses must be identified within the structure of this Fee Schedule. Complete the Budget Narrative sheets for each expense item to provide supporting detail. The Budget Narrative sheets follow the Fee Schedule.

The Fee Schedule must be signed where indicated by the authorized signatory.

Capitation \$ _____ Fixed Per Day Per Inmate Capitation Rate
Rate

Authorized Signatory

Date

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Breakdown of relative daily costs included in the capitation rate:

No.	Title	Relative Daily Cost
1.	Employee Personal Services – Direct Care	
1.1	Medical Services: Wages and Overtime	\$
1.2	Dental Services: Wages and Overtime	\$
1.3	Pharmacy Services: Wages and Overtime	\$
1.4	Mental Health Services: Wages and Overtime	\$
2.	Employer Related Expenditures for Employees– Direct Care	
2.1	Medical Services: Employer Related Expenditures	\$
2.2	Dental Services: Employer Related Expenditures	\$
2.3	Pharmacy Services: Employer Related Expenditures	\$
2.4	Mental Health Services: Employer Related Expenditures	\$
3.	Professional and Outside Services– Direct Care	
3.1	Medical Services: Professional and Outside Services	\$
3.1.1	Savings Due to Capital Construction for On-Site Services	\$
3.2	Dental Services: Professional and Outside Services	\$
3.3	Pharmacy Services: Professional and Outside Services	\$
3.4	Mental Health Services: Professional and Outside Services	\$
4.	Travel – In State	
4.1	Medical Services: Travel – In State	\$
4.2	Dental Services: Travel – In State	\$
4.3	Pharmacy Services: Travel – In State	\$
4.4	Mental Health Services: Travel – In State	\$

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Breakdown of relative daily costs included in the capitation rate:

No.	Title	Relative Daily Cost
5.	Travel – Out of State	
5.1	Medical Services: Out of State	\$
5.2	Dental Services: Out of State	\$
5.3	Pharmacy Services: Out of State	\$
5.4	Mental Health Services: Out of State	\$
6.	Other Operating Expenses	
6.1	Medical Services Other Operating Expenses	\$
6.2	Dental Services: Other Operating Expenses	\$
6.3	Pharmacy Services: Pharmaceuticals	\$
6.4	Pharmacy Services: Other Operating Expenses excluding Pharmaceuticals	\$
6.5	Mental Health Services: Other Operating Expenses	\$
7.	Capital Equipment	
7.1	Medical Services:	\$
7.2	Dental Services:	\$
7.3	Pharmacy Services:	\$
7.4	Mental Health Services:	\$
7.5	Building Improvement/Construction	\$
8.	Non-Capital Equipment	
8.1	Medical Services:	\$
8.2	Dental Services:	\$
8.3	Pharmacy Services:	\$
8.4	Mental Health Services:	\$

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~~Breakdown of relative daily costs included in the capitation rate:~~

No.	Title	Relative Daily Cost
9.	Insurance	
9.1	Commercial General Liability	\$
9.2	Business Automobile Liability	\$
9.3	Umbrella Liability	\$
9.4	Professional Liability	\$
10.	Cost Allocation and Indirect Costs	
10.1	All Services: Cost Allocation and Indirect Costs	\$
11.	Other	
11.1	Claims	\$
11.2	EHR / EMAR System (includes all associated costs)	\$
11.3	Data conversion costs (including paper records)	\$
11.4	In-State Administration	\$
11.5	Out-of-State Administration	\$
11.6	Profit	\$

TOTAL DAILY COST/INMATE*

\$ _____

* The Total Daily Cost/Inmate cost above shall be the same as the Fixed Per Day Per Inmate Capitation Rate on the first page of the fee schedule.

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BUDGET NARRATIVE

Instructions: On the following pages, Offerors are to provide written narratives for each cost item on the Fee Schedule. Calculations provided via the Budget Narrative shall ultimately breakdown to the total daily costs shown on the Fee Schedule. Offerors may computerize the Budget Narrative forms; however, format and content must remain unchanged. Be descriptive and provide the Department with enough detail to explain how the cost of the expense category was calculated.

No.	Title
-----	-------

- | | |
|-------|---|
| 1. | Employee Personal Services– Direct Care |
| 1.1 | Medical Services: Wages and Overtime |
| 1.2 | Dental Services: Wages and Overtime |
| 1.3 | Pharmacy Services: Wages and Overtime |
| 1.4 | Mental Health Services: Wages and Overtime |
| 2. | Employer Related Expenditures for Employees– Direct Care |
| 2.1 | Medical Services: Employer Related Expenditures |
| 2.2 | Dental Services: Employer Related Expenditures |
| 2.3 | Pharmacy Services: Employer Related Expenditures |
| 2.4 | Mental Health Services: Employer Related Expenditures |
| 3. | Professional and Outside Services– Direct Care |
| 3.1 | Medical Services: Professional and Outside Services |
| 3.1.1 | Savings Due to Capital Construction for On-Site Services |
| 3.2 | Dental Services: Professional and Outside Services |
| 3.3 | Pharmacy Services: Professional and Outside Services |
| 3.4 | Mental Health Services: Professional and Outside Services |
| 4. | Travel – In State |
| 4.1 | Medical Services: Travel – In State |
| 4.2 | Dental Services: Travel – In State |
| 4.3 | |

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PHOENIX, ARIZONA 85007

SOLICITATION NO. ADOC12-00001105 AMENDMENT NO. 3 Contract Officer: Karen D. Ingram

SOLICITATION DUE DATE: December 21, 2011

SIGNED COPY OF THIS AMENDMENT MUST BE RETURNED WITH YOUR BID SOLICITATION.

THIS SOLICITATION IS AMENDED AS FOLLOWS:

- | No. | Title |
|-----|--|
| | Pharmacy Services: Travel – In State |
| 4.4 | Mental Health Services: Travel – In State |
| 5. | Travel – Out of State |
| 5.1 | Medical Services: Out of State |
| 5.2 | Dental Services: Out of State |
| | Pharmacy Services: Out of State |
| 5.3 | |
| 6. | Other Operating Expenses |
| 6.1 | Medical Services Other Operating Expenses |
| 6.2 | Dental Services: Other Operating Expenses |
| 6.3 | Pharmacy Services: Pharmaceuticals |
| 6.4 | Pharmacy Services: Other Operating Expenses excluding
Pharmaceuticals |
| 6.5 | Mental Health Services: Other Operating Expenses |
| 7. | Capital Equipment |
| 7.1 | Medical Services: |
| 7.2 | Dental Services: |
| 7.3 | Pharmacy Services: |
| 7.4 | Mental Health Services: |
| 7.5 | Building Improvement/Construction |
| 8. | Non-Capital Equipment |
| 8.1 | Medical Services: |
| 8.2 | Dental Services: |
| 8.3 | Pharmacy Services: |
| 8.4 | Mental Health Services: |

SOLICITATION AMENDMENT

ARIZONA
DEPARTMENT OF CORRECTIONS
1601 W. JEFFERSON, MAIL CODE 55302
PROCUREMENT SERVICES
PHOENIX, ARIZONA 85007

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SOLICITATION DUE DATE: December 21, 2011

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THIS SOLICITATION IS AMENDED AS FOLLOWS:

- | No. | Title |
|------|---|
| 9. | Insurance |
| 9.1 | Commercial General Liability |
| 9.2 | Business Automobile Liability |
| 9.3 | Umbrella Liability |
| 9.4 | Professional Liability |
| 10. | Cost Allocation and Indirect Costs |
| 10.1 | All Services: Cost Allocation and Indirect Costs |
| 11. | Other |
| 11.1 | Claims |
| 11.2 | EHR / EMAR System (includes all associated costs) |
| 11.3 | Data conversion costs (including paper records) |
| 11.4 | In-State Administration |
| 11.5 | Out-of-State Administration |
| 11.6 | Profit |

SOLICITATION AMENDMENT

ARIZONA
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THIS SOLICITATION IS AMENDED AS FOLLOWS:

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ALL OTHER PROVISIONS OF THE SOLICITATION SHALL REMAIN IN THEIR ENTIRETY

Vendor hereby acknowledges receipt and
understanding of above amendment.

The above referenced Solicitation Amendment
is hereby executed this 21st day of November, 2011
at Phoenix, Arizona.

Signature _____ Date _____

Typed Name and Title _____

Name of Company _____


Denel Pickering Chief Procurement Officer